Form **8871**

For Paperwork Reduction Act Notice, see page 4.

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

nternal Revenue Service			
Part I General Information			Employer Identification number
1 Name of organization	TER FUR	SENATE	41 1979315
MADY REI	de Re To Re	numberl	
2 Mailing address (P.O. Box or nu	mber, street, and room or suite $A \cap A \cap B \cap B \cap B$	number)	*
9219 A167	TERTOS OR		
2 Mailing address (P.O. Box or nu 4279 H (G) City or town, state, and ZIP coo SHOREU I E	w, MN	5-5-126	
3 E-mail address of organization	nreiter a	gateway .	net
4a Name of custodian of records		stodian's address	IER ST
ANN ZIBELL		SHOREVIEW,	MN 55126
5a Name of contact person	5b Co	ntact person's address	HLAND DRIVE
MADY REITE	R -	SHOREVIEW	, MN 55126
6 Business address of organization	on (if different from mailing addre	ess shown above). Number, stree	t, and room or suite number
City or town, state, and ZIP co	de		
David David			
Part II Purpose 7 Describe the purpose of the ord	agnization		
7 Describe the purpose of the or	Do	TICAL CAMPI	+16 N
	No. of P. Samuel V	77	
Part III List of All Relate	d Entities (see instruction	ns)	
8a Name of related entity	8b Relationship	8c Address	
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Cat. No. 30405V

l IV Name		9b Title	mpensated Employees (see instructions) 9c Address
			400 4014
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	Under penalties of perjury, I dec	are that the organization named in	1 Part Lis to be treated as an organization described in section 527 of the
	Revenue Code, and that I have e it is true, correct, and complete.	xamined this notice, including acc	ompanying schedules and statements, and to the best of my knowledge and
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	MAX	rite	7-28-00
n re	1100		

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